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BIRTH TO THREE SYSTEM

PRESCHOOL SPECIAL
EDUCATION

BIRTH
through news

• *Working together for children with disabilities* • INFORMATION FOR FAMILIES AND PROFESSIONALS

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Eating and Feeding Challenges

By Sherry Gray
University of Connecticut
Cooperative Extension System
EFNEP Supervisor/Extension
Educator

Eating and feeding issues of children from birth through age five can be challenging for their parents.



This article is translated into Spanish on page 2. Ver la versión española de este artículo en la página 2, y todos los artículos a www.birth23.org

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in collaboration with the



University of
Connecticut

COOPERATIVE EXTENSION SYSTEM
College of Agriculture and Natural Resources

Being sure that your young child is eating healthy amounts and types of foods can be a concern for all parents and especially for parents of children with special needs. Follow your pediatrician's or health care professional's recommendations for daily meal planning. Support healthy eating and feeding practices by:

- Developing a mealtime routine including a familiar place, time and activities that your child will learn to expect.
- Making mealtime a pleasant experience.
- Planning enough time so mealtimes are not rushed. And, expect that you will need extra time for clean-up!

Does the Child Want to Feed Himself?

Most parents look forward to the day when their child can feed himself. It can be hard to know if the child is showing signs of wanting to do this. Physical ability is important for self feeding, but that is not enough. A child must also want to participate in the process. The following are some clues that may indicate a child wants to feed himself:

- Understanding – Does the child understand his part in feeding himself? Has he had enough experience to be successful?
- Anticipation – Is he able to let you know when he is hungry or

full? Does he show excitement in eating?

- Reach – Can the child reach for objects that are placed near him?
- Food preferences – Does the child enjoy certain foods more than others?
- Playing with food – Is the child interested in playing with food either during or after he is finished eating?

Can the Child Feed Himself?

The following are some questions to ask yourself about your child's physical readiness to feed himself:

- Does he have the physical control to bring an object to his mouth? A child may have the physical skills for independence in one area of self feeding, such as bottle drinking, but not for others, such as using a spoon. Cup drinking and spoon feeding require a lot of control for success.
- Can your child hold onto and let go of objects in his hands? Can he hold the food, bring it to his mouth and then let it go to put it in his mouth?
- Can your child use hands and mouth together in a coordinated way? Does your child have the lip and jaw skills to take food off the spoon while holding the spoon steady at the lips?

The following chart can help parents and professionals assess a child's readiness for a variety of feeding tasks.

(Continued on page 2)

If your child has:	He may be ready for:
▪ Head control	spoon feeding
▪ Strong suck	strained or pureed foods
▪ Independent tongue and lip movement	soft, mashed foods
▪ Chewing movement	large sized (1/2–1 inch) finger foods
▪ Ability to grasp with hand	more textured foods such as mashed potatoes
▪ Hand to mouth activity	
▪ Tongue and lip control	cup drinking
▪ Ability to sit alone without support	
▪ Ability to pick up small objects between thumb and forefinger	
▪ Ability to let go and pick up	small sized (1/4-1/2 inch) finger foods
▪ Voluntary hand to mouth motion	feeding himself with spoon
▪ Beginning chewing movements up and down and side to side	complex food textures such as meats and casseroles; self-feeding with fork

Adapt the Environment for Success

There are many things in the child's environment that can be adapted to minimize the effects of physical challenges. You may help your child be more successful in feeding himself by:

- making changes in your child's posture as a result of raising or lowering his chair
- changing table height
- modifying utensils such as spoon handle size, bowl shape
- adapting food texture such as

Las comidas de los niños como reto

*Por Sherry Gray, Universidad de Connecticut
Cooperative Extension System
EFNEP Supervisor/Extension Educator*

Lo referente a comidas y nutrición de los niños desde que nacen hasta los 5 años puede ser un reto para los padres. A todo padre le preocupa no tener la certeza de que sus pequeños ingieren alimentos saludables en cuanto a tipo y cantidad, especialmente si se trata de niños con necesidades especiales. Debe

seguir las recomendaciones de su pediatra al planificar las comidas diarias. Debe además adoptar prácticas saludables:

- implementando para las comidas una rutina que incluya un lugar familiar, un horario fijo, y algunas actividades que el niño aprenda a asociar con expectación,
- haciendo de las horas de las comidas una experiencia agradable,
- planificando tiempo suficiente para que las comidas se disfruten sin prisa, y contando con el

allowing lumps in mashed foods and mixing crumbled graham crackers in yogurt

- increasing calories in foods such as adding margarine or dry milk to foods
- keeping the room quiet by turning off TV and radio and taking phone off the hook

Remember that all children love special attention and praise when they are able to do something for themselves!

Early intervention for feeding concerns is very important. Young children who experience difficulties should see a specialist to develop an individualized feeding plan. An accurate assessment by a professional can assist in determining the type of help that is needed for a particular child. The Connecticut Birth to Three System provides feeding assessments to eligible infants and young children. Also, speech and occupational therapists in private practice or pediatric hospital settings and pediatric nutritionists can provide assistance and intervention.



tiempo necesario para recoger y limpiar!

¿Quiere el niño comer sin ayuda?

La mayoría de los padres ansía la llegada del día en que el niño coma solo. Puede ser difícil saber si el niño ya quiere que llegue ese día. Es importante que el niño tenga la habilidad física para comer solo, pero no es suficiente, tiene que querer participar en el proceso. A continuación van algunos indi-

cios de que el niño quiere comer sin que lo ayuden:

- Comprensión – ¿Comprende la parte que le corresponde desempeñar? ¿tiene suficiente experiencia?
- Expectación – ¿Puede hacer saber que tiene hambre o que está lleno? ¿Muestra excitación para comer?
- Capacidad de alcanzar objetos – ¿Puede agarrar objetos colocados a su alcance?
- Preferencia – ¿Le gustan algunos alimentos más que otros?
- Jugar con la comida – ¿Tiende a jugar con la comida antes o después de comer?

¿Puede el niño comer sin ayuda?

- Usted puede hacerse algunas preguntas sobre si el niño está listo para comenzar a comer solo:
- ¿Tiene el control físico necesario para llevarse un objeto a la boca? Puede que tenga la aptitud necesaria en ciertas áreas, como por ejemplo para tomar leche en pomo, pero no en otras como utilizar una cuchara. Se necesita mucho más control para tomar en taza y manejar la cuchara.
- ¿Puede el niño agarrar cosas y soltarlas? ¿Puede agarrar trozos de comida, llevárselos a la boca y soltarlos?
- ¿Puede el niño utilizar las manos y la boca coordinadamente? ¿Puede mover la mandíbula y los labios para descargar la cuchara mientras sostiene ésta junto a los labios?

El siguiente cuadro puede ayudar a padres y profesionales a determinar cuan listo está un niño para una variedad de tareas en el proceso de ingestión de alimentos.

Si el niño tiene:	Puede estar listo para:
▪ Control de la cabeza	utilizar la cuchara
▪ Bastante capacidad de succión	tomar alimentos colados o en puré
▪ Movimiento independiente de lengua y labios	comida blanda, como puré
▪ Movimientos de masticación	trozos de 1/2 a 1 pulgada que se puedan asir
▪ Aptitud de agarrar objetos	comida de textura tipo papa majada
▪ Actividad mano a boca	
▪ Control de lengua y labios	tomar en taza
▪ Aptitud de sentarse solo sin apoyo	
▪ Aptitud de agarrar objetos pequeños con el pulgar y el índice	
▪ Aptitud de soltar y recoger	trozos de 1/4 a 1/2 pulgada que se puedan asir
▪ Movimiento voluntario para llevar la mano a la boca	comer solo con cuchara
▪ Movimientos iniciales de masticación verticales y laterales	comida de textura compleja como carnes y cacerolas; comer solo con tenedor

Adaptación del entorno para resultados satisfactorios

Hay muchas cosas en el entorno del niño que pueden adaptarse para minimizar los efectos de los retos físicos. Se puede ayudar al niño a lograr que coma solo:

- elevándole o bajándole la silla para alterar su postura
- cambiando la altura de la mesa
- modificando cubiertos y vajilla (tamaño del mango de la cuchara, forma del tazón...)
- adaptando la textura de la comida (dejando grumos o trocitos en alimentos majados, mezclando en el yogurt galletas 'graham' desmenuzadas...)
- aumentando las calorías de la comida (añadiéndole margarina o leche en polvo...)
- manteniendo el comedor tranquilo (apagando la televisión, descolgando el teléfono...)

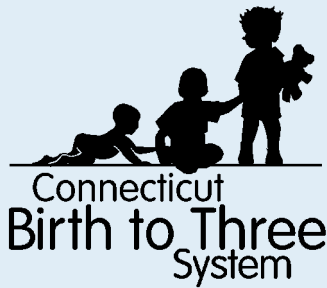
¡Recuerde que a todos los niños les gusta que les presten atención especial y los celebren cuando logran hacer algo sin ayuda!

Es muy importante la intervención temprana cuando hay motivo de preocupación con la ingestión de comida. Los niños tiernos con dificultades deben ver a un especialista para desarrollar un plan individualizado. Una buena evaluación profesional puede ayudar a determinar el tipo de ayuda necesaria para un niño en particular. El Sistema para Infantes a Tres Años de Connecticut provee evaluaciones a los infantes elegibles y niños pequeños.

También pueden proporcionar asistencia e intervención los terapeutas del lenguaje y ocupacionales en ejercicio privado o en hospitales pediátricos, así como los nutricionistas pediátricos.



Birth to Three System Update



By Linda Goodman, Director
CT Birth to Three System


Parents often ask me to explain how we know if each of the 36 Birth to Three programs is doing a good job. Over the past four years, we have had an extensive quality assurance process. First, each program assessed itself against a long list of standards. Then, four to eight Birth to Three staff visited each program to review records, interview the administrator, interview staff, and, with the assistance of parents, interview families receiving

services from the program. If issues of quality or compliance with the law were found, the program wrote an improvement plan describing how they would correct serious issues immediately and how the program would gradually improve in any areas identified as needing improvement. Although this process was very comprehensive and allowed us to meet many staff and over 400 families, it was also extremely time-consuming and expensive and, without returning to the program for another review of records or face-to-face interviews, difficult to document that a program had improved.

An alternative is to select a few important indicators for which we have data and to measure programs continuously against their similarly sized colleagues in order to assess when progress has been made. Therefore, working with the State Interagency Coordinating Council, we have selected three indicators:

1. Child Find—
Do new families have an IFSP in

- place within 45 days of referral?
2. Quality Services—
Are families receiving all of the services in their IFSP?
3. Smooth Transitions—
Are children referred to their school districts early (by age 30 months) and are transition conferences with the school districts held on time (at least 90 days before the child's third birthday)?

We will compare the programs on each of these indicators (those results will be posted on the Birth to Three website: www.birthe23.org), and then we will select the programs that seem to be in need of the most improvement for each indicator in each size group. A team of one Birth to Three staff person and a group of parents will visit those programs. The team will ask many more questions that will get beyond the numbers and really look at the quality involved in initial evaluations and IFSPs, service delivery, and transition. We hope to begin in January or February 2005. 

Mealtimes Are Special Times

By Susan R. Davis, M.S., R.D
Nutrition Consultant

Mealtimes are one of the first relationships that parents have with their babies. This relationship requires that the parents and children spend time together.

Eating is what the child does.
Feeding is what the parent does.
Many factors influence whether a child eats a new food.

The following are some tips to make it successful:

- Offer a very small amount
- Encourage the child to self-feed
- Show the child that you enjoy

the food


- Allow the child to try a small bite
- Praise the child for trying it
- Do not be discouraged. Over a period of time, offer the food 20-25 times. Try again in a few months.

Feeding is an everyday and several times a day event. Each occasion offers parents a chance to teach their children something new.

- Inform the child that the meal is almost ready. (teaches how to move to the next activity and end the present activity)
- Try to serve meals at the same time each day; children love regularity and routines. (teaches anticipation and trust)
- Feed children in their chair at the table. (teaches how to sit for extended periods of time and that

the child has a special place)

- Help the child to eat by turning off the television and putting away the toys. (teaches how to focus on one activity)
- Sit and talk to the child during mealtimes. (teaches more words)
- Talk about the food. (teaches colors, numbers, and shapes)
- Allow children to eat with their family. (teaches table manners)
- Feed children fruits and vegetables cooked and raw. (teaches taste and texture)
- Encourage children to help with meal preparation. (teaches sequential order, counting and measuring)

Use food and mealtimes as a fun way to teach skills as you help prepare your child for school. 

Kids and Food: A Delicious Combination!

Tips submitted by Leslie Jones¹, Pam Pinto², and Eileen McMurrer³

Looking for ideas on how to get your children to:

Try new foods?

Eat healthier foods?

Eat more/less food?

And how to make eating more fun?

Try these suggestions with your own little ones. Once you see what fits your own home and family, you will begin to find more ways to turn eating into a positive, healthy experience.

New Foods: Involve your children in the harvesting or shopping phase of food choice. Let them pick their own fruits and veggies, whether at a farm or the corner grocery store. Have them pick out the color of the apples to buy and then point to or pick out which ones will go into your shopping basket. Find ways to have them help prepare the food, maybe by dunking the apples in fresh water to wash them before cutting. Pair new foods with old favorites: dip those apple slices in honey, add a slice of cheese, or spread peanut butter on top. Kids are often more interested in foods they have chosen and prepared, so it is worth the extra time and mess.

Improving Nutritional Values: Tune in to colors of foods that capture your child's attention. If your child's favorite color is green, serve foods that are naturally healthy and green (peas, broccoli) or take something healthy like milk and add a drop or two of food coloring. Combine

bright colors: green peas with orange carrot slices for instance. If color does not interest your child, try mixing different fruits with yogurt and juice as a smoothie (and slip in a new food!). Have your child press the button on the blender (participate!) and dance along to the noise it makes. Add some flax seeds or ground nuts to muffins, soups, meatballs or spaghetti sauce.

Eat more or less food: Get older brothers and sisters in on the act of modeling how much or little, how fast or slow. Use stickers or other rewards that are meaningful to your child as a way to let them know they have eaten the right amount according to your goals for them. If too much food is the problem, offer drinks of water and milk throughout the day to fill them up and use smaller plates so the portion sizes look bigger. If not enough food is the problem, try limiting drinks (within reason) and make sure the calories eaten have good nutritional value.

Make feeding time more fun: Try using natural shapes of healthy foods in creative ways; turn a sliced ring of green pepper into a face by adding a smile made from corn kernels and green peas for eyes. Use cookie cutters to turn boring food into stars, dinosaurs, or teddy bears. Relax; get creative and stop being too hard on yourself. If you are having fun, your child is more likely to have fun too!

1 Leslie is a mom of three including Patrick, age five, who sometimes uses a feeding tube to assist with his weight gain.

2 Pam enjoys using her background as a holistic health and nutrition counselor when cooking with her two little girls who have food sensitivities.

3 Eileen is a mom of three, aged five, nine & eighteen

BIRTH through 5 news

Information for Families and Professionals

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Preschool Special Education Update

By Maria Synodi, Coordinator,
Preschool Special Education

The State Department of Education is continuing its activities related to special education monitoring and accountability. One of the areas of focus in the state's efforts is the "least restrictive environment" (LRE) for preschool and kindergarten children receiving special education and related services. The Department analyzes the educational settings of 3-, 4- and 5-year-olds and the amount of time children with disabilities spend with their non-disabled peers.

Educational settings are identified and defined by the federal government. States are obligated to report the numbers of preschool and kindergarten children in the various federally defined settings. The information is collected from all school districts serving young children with disabilities.

The collection of information is used by the state to help develop an annual continuous improvement plan. The most recent continuous improvement plan can be found at: <http://www.state.ct.us/sde/deps/special/index.htm#Publications>.

The Department has also created a 'map' of the state to identify the status of the LRE throughout the state at the preschool and kindergarten level. That information can be

found at:

<http://www.state.ct.us/sde/deps/special/index.htm#Focused%20Monitoring>. The map represents the school district's data based upon the federal definitions of educational settings.

These two resources provide a snapshot of school district efforts at providing an LRE for 3-, 4-, and 5-year-old children with disabilities. The Department of Education is continuing to work with districts to expand the LRE for young children with disabilities – and school districts are making their own concerted efforts at the local level. We will keep working on LRE and expect that next year's continuous improvement plan and data map will reflect the positive strides made.

ICC Update A Parent's Perspective

By Maria Engborg, ICC Parent

As my term on the ICC ends this year (my son will turn 12) I would like to share my perspective on my experience as a parent on this important council. I have to admit, when I first joined the ICC, I was a bit intimidated since everyone at the table had an impressive title but me. I wondered if I was just a token parent or if my voice would be heard. I am pleased to report that what I found was a group of people willing to listen and committed to the cause – making services better for young children and their families in Connecticut.

The Birth to Three System has faced some serious challenges during my tenure on the ICC. As a parent, I am very reassured to see how key players in the state from a variety of different agencies come together and

face these challenges. I have come to realize how critical my perspective as a parent is in everything we discuss. I have truly valued the opportunity to speak for other families who have walked in my shoes and have felt empowered by doing so. Working at the systems change level has been an exciting and rewarding experience. I have learned more about the big picture and how critical parent involvement is.

Birth to Three made such an important difference in my family's life and I have been honored to be able to give back to this wonderful program. I would like to encourage other families to get involved – you will reap many rewards and can make a difference for the families who will follow you.

The ICC currently has two vacant parent seats. If you are interested, feel free to give me a call at 203-629-1880 x 314, or Eileen McMurrer, staff support to the ICC, at 860-418-6134.



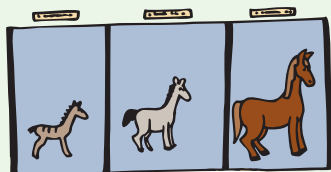
Dates for future State ICC meetings (held at Infoline, 1344 Silas Deane Highway in Rocky Hill):

February 7, 2005

April 11, 2005

June 13, 2005

August 8, 2005



Training Calendar



Contact the Special Education Resource Center (SERC) at www.ctserc.org or at 860-632-1485 for information on these events:

Designing and Evaluating Discrete Trials Intervention for Young Children with Autism: A Workshop for Experienced Practitioners, Birth through Five

Kathleen Dyer, Ph.D.

1/11/05

Radisson, Cromwell

Welcoming All Children: Including Children with Special Needs in Preschool Programs

Phillippa Campbell, Ph.D.

1/13/05

Radisson, Cromwell

Strategies for Addressing Challenging Behavior in Young Children

Mary Louise Hemmeter, Ph.D.

Session B: 1/14/05 – Keeney

Center, Wethersfield

Session C: 2/8/05 – Keeney

Center, Wethersfield

Partnering With Families Who Experience Multiple Stressors

Angela Tomlin, Ph.D.

1/19/05

Radisson, Cromwell

Home Visiting: Supporting Families through the Coaching Model

Dathan Rush, M.Ed.

M'Lisa Sheldon, Ph.D.

1/27/05

Radisson, Cromwell

Building Blocks

Susan Sandall, Ph.D.

2/18/05

Radisson, Cromwell

Assessing Three to Five-Year-Old Children with Special Needs: Why Assess? What is the Most Appropriate Tool?

Marianne Barton Ph.D.

3/9/05

Radisson, Cromwell

Strategies for Responding to Cultural and Linguistic Diversity in Early Childhood

Isuara Barrera, Ph.D. and Lucinda

Krammer

3/10/05 and 3/11/05

Radisson, Cromwell

LRE and Due Process: Implications of IDEA as Related to Preschool Age Children, Birth to Five

Rutheford Turnbull, J.D., LL.M.

5/6/05

Radisson, Cromwell

Contact the Connecticut Parent Advocacy Center (CPAC) at 800-445-2722 or

cpac@cpacinc.org for more information on the following conference:

Moving Through Life Changes

6/3/05 and 6/4/05

Farmington Marriott Hotel



Together We Will 12th Annual Conference

Pre-Conference: *A Team Based Approach to Address the Needs of Young Children with Ongoing Problem Behavior*

Thursday, April 7, 2005

9:00 a.m. to 3:30 p.m.

Marriott, Trumbull

Mary Louise Hemmeter, Ph.D., Associate Professor,
Department of Special Education

University of Illinois

Conference Fee: \$30

Together We Will: Meet the Needs of Young Children with Challenging Behaviors

Friday, April 8, 2005

9:00 a.m. to 3:30 p.m.

Marriott, Trumbull

Keynote: *Working Together to Promote Children's Social-Emotional Development and Prevent Challenging Behavior*

Mary Louise Hemmeter, Ph.D., Associate Professor,
Department of Special Education

University of Illinois

Fourteen breakout sessions covering a variety of topics related to children from birth through age five, especially those with special needs.

Conference Fee: \$40 (\$45 after due date)

Parent Fee Waivers and Parent Stipends (\$40) available.

To obtain a conference brochure, available after January 2005, contact Jenn Sharpe, 860-632-1485 x 268.

Resources

www.state.ct.us/sde/deps?Early/index.htm. Scroll down to child nutrition concept paper. This website includes information on providing nutrition services and effective nutrition education for young children.

<http://www.msue.msu.edu/fnh/tn/booklistintro.htm>. Annotated list of over 300 books about food, healthy eating, and physical activity for young children

<http://www.fns.usda.gov/tn/Resources/goglowgrow.html>. Go, Glow, Grow. USDA interactive nutrition activity booklet for three and four-year olds.

<http://www.fns.usda.gov/tn/Resources/nibbles.html>. Nibbles for Health:

Nutrition Newsletters for Parents of Young Children. USDA site includes information on conducting nutrition discussions with parents and contains 41 reproducible parent newsletters.

Pretend Soup and Other Real Recipes – A Cookbook for Preschoolers and Up by Mollie Katzen and Ann Henderson. Tricycle Press. Berkeley, California. This is a cookbook designed to enable young children to cook as independently as possible under the guidance of an adult partner.

Nutrition Activities for Preschoolers by Debby Cryer, Adele Richardson Ray and Thelma Harms. Dale Seymour Publications, 1996. This illustrated guide helps early childhood programs make nutrition part of the daily learning environment.

For more nutrition information and resources contact:

Connecticut State Department of Education

Office of Child Nutrition
860-807-2075

Connecticut State Department of Public Health

Child Day Care Licensing
860-509-8045
800-282-6063

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860-486-3635



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